B1 (Official Form 1)(1/08)							,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	States Bank stern District o						Voluntary	Petition
Name of Debtor (if individual, enter Last, First, Vick, Michael D.	Middle):		Name	of Joint D	ebtor (Spouse	c) (Last, First, M.	iddic):	
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):				All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names):				
Last four digits of Soc. Sec. or Individual-Texpa (if more than one, state all)	yer I.D. (ITIN) No.	Complete Ell	V Last f	our digits o	f Soc. Sec. of date all)	r Individual-Tax	payer I.D. (ITIN) No	/Complete EIN
Street Address of Debtor (No. and Street, City, a 21 Haywagon Trail Hampton, VA		ZIP Code	Street	Address of	f Joint Debtor	(No. and Street	City, and State):	ZIP Code
County of Residence or of the Principal Place of		23669	Count	y of Reside	ence or of the	Principal Place	of Business:	
Hampton City					<del>- 211 - 81</del> 7	de Nos r		
Mailing Address of Debtor (if different from stre USP Levenworth P. O. Box 100 Leavenworth, KS	ranenna saran aran kanan k	ZIP Code	Mailti	ng Address	of Joint Debi	tor (it dillerent i	om street address):	ZIP Code
Location of Principal Assets of Business Debtor		66048						
(if different from street address above):	N. H. Sansan						)* )*	. 8
Type of Debtor (Form of Organization) (Check one box)  Individual (includes Joint Debtors) See Exhibit D on page 2 of this form.  Corporation (includes LLC and LLP) Partnership Other (if debtor is not one of the above entities, check this box and state type of entity below.)	(Cheel    Health Care Bt   Single Asset R   in 11 U.S.C. §   Railroad   Stockbroker   Commedity Br   Clearing Bank   Other    Tax-Exe	eal Estate as of 101 (51B)  oker  mpt Entity x, if applicable) exempt of the United	nízation States	defined "incurr	the lor 7 ter 9 ter 11 ter 12 ter 13 ter 13 ter 11 ter 12 ter 13	Petition is Filed  Chapt of a F  Chupt of a F  Nature of (Check one	Dehts busine	ecognition ding
Filing Fee (Check on Full Filing Fee attached  Full Filing Fee to be paid in installments (application for the court's consi is unable to pay fee except in installments, Ru  Filing Fee waiver requested (applicable to chattach signed application for the court's consi	ble to individuals on ideration certifying t ule 1006(b). See Offi apter 7 individuals of	that the debto icial Form 3A. only). Must	r Check	Debtor is if: Debtor's i to insiders all applica A plan is Acceptant	a small busing the small busing aggregate nor affiliates) ble boxes: being filed were of the pla	usiness debtor as acontingent liqui are less than \$2 ith this petition. If were solicited	fined in 11 U.S.C. § defined in 11 U.S.C dated debts (excludi	C. § 101(51D), ng debts owed
Statistical/Administrative Information  Debtor estimates that funds will be available	for distribution to u	nsecured ered	itors.			THIS SPA	ACE IS FOR COURT (	JSE ONLY
Debtor estimates that, after any exempt proper there will be no funds available for distribution	arty is excluded and on to unsecured erer	administrativ ditors.	e expense	s paid,				
1- 50- 100- 200- 1	] [] ,000- 5,001- 5,000 10,000	10,001-	] 25,001- 50,000	50.001- 100,000	OVER 100,000		*	
- \$30,000 \$100,000 \$300,000 to \$1 to		10 4100	] :100,000,001 n \$500 nillion	2560,000,001 (6 \$1 billion	More than \$1 billion			
\$50,000 \$100,000 \$500,000 to \$1 to	1,000,001 \$10,000,001 \$10 to \$50 sillen rellion	250,000,001 S	]   100,000,001   \$300   oillies	\$500,000,001 10 \$1 billion			* 5	4

Voluntary Petition		Name of Debtor(s): Vick, Michael D.				
(This page must be completed and filed in every case)		VICK, MIChael D.				
(1 nis page mi	All Prior Bankruptcy Cases Filed Within Last	8 Venre (If more than two	attach additional short)			
Location	All Prior Bankrupicy Cases rated within Last	Case Number:	Date Filed:			
Where Filed:	- None -					
Jocation Where Filed:		Case Number:	Date Filed:			
Po	ending Bankruptcy Case Filed by any Spouse, Partner, or	Affiliate of this Debtor (If a	more than one, attach additional sheet)			
Name of Deb - None -	tor:	Case Number:	Date Filed:			
District:		Relationship:	Judge:			
	Exhibit A	(To be emunicial if deliter is an	Exhibit B individual whose debts are primarily consumer debts.)			
forms 10K a pursuant to and is reque	pleted if debtor is required to file periodic reports (e.g., and 10Q) with the Securities and Exchange Commission Section 13 or 15(d) of the Securities Exchange Act of 1934 esting relief under chapter 11.)  A is attached and made a part of this petition.	have informed the petitioner	0.00			
Exhibit	bleted by every individual debtor. If a joint petition is filed, ea D completed and signed by the debtor is attached and made		i anaon a separate exhibit D.)			
	int petition:  D also completed and signed by the joint debtor is attached a	and made a part of this petition	n.			
	D also completed and signed by the joint debtor is attached a		эп.			
	D also completed and signed by the joint debtor is attached a Information Regardin	g the Dehtor - Venue	on.			
	D also completed and signed by the joint debtor is attached a	g the Dehtor - Venue plicable box)	ipal assets in this District for 180			
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## Voluntary Petition

(This page must be completed and filed in every case)

Name of Debtor(s): Vick, Michael D.

Signatures

## Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of fitte 11. United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X Signature of Debtor Michael D. Vick
X Signature of Joint Debtor

Telephone Number (If not represented by attorney)

July 7, 2008 Date

Signature of Attorney\*

Signature of Attorney for Debtor(s)

Paul K. Campsen 18133/Dennis T. Lewandowski 22232
Printed Name of Attorney for Debtor(s)

Kaufman & Canoles, a professional corporation

Firm Name 150 West Main Street, Suite 2100 Norfolk, VA 23514-3037

Address

(757) 624-3000 Fax: (757) 624-3169

Telephone Number

July 7, 2008

Date

\*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

## Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

☐ I request relief in accordance with chapter 15 of title 11. United States Code.

Certified copies of the documents required by 11 U.S.C. §1515 are attached.

Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

X Signature of Foreign Representative

Printed Name of Foreign Representative

Date

## Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I sm a bankruptey petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptey petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankrutpey petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptey petition preparer.)(Required by 11 U.S.C. § 110.)

Address

X\_

Date

Signature of Bankruptey Petition Preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual;

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's fallure in comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. §110; 18 U.S.C. §156.